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Cancer Disparities Committee Meeting #1
September 10, 2002, 10am-12pm
DHMH, Secretary's Conference Room

⇒ **Introductions and background information**

- Committee members and staff introduced themselves, giving name and affiliation.
- Robert Villanueva, Executive Director of the State Council on Cancer Control, briefly reviewed the history of cancer planning Maryland. The process for the development of the new cancer plan allows for much broader input than in the past. Also, Maryland is the first state to have a section focusing on disparities as part of its cancer plan.
- Mr. Villanueva also reviewed the organizational structure of the planning process and the evaluation component of the grant. Evaluation surveys must be completed by each committee member at the end of each meeting.
- Kate Shockley, Program Coordinator for the Maryland Cancer Plan, reviewed the timeline and logistics for the committee, including use of the website for posting of meeting minutes. All committee members agree to also have their name and affiliation posted on the website.
- Ms. Shockley also described the Town Hall Meetings held this summer and the Consensus Conference to be held October 16, 2002.

⇒ **Defining Disparity, Scope of the Committee**

- Past emphasis has been placed on racial disparities, whereas many types of disparity exist, especially in Maryland, such as geographic disparities.
- Suggestion that NCI is currently evaluating the topic of disparities and plans to revise and expand their definition to include a moral component.
- Suggestion that the definition of disparity ought to include some reference to access and equality of care. An example was raised: disparities in access to mammography don't fit into the current NCI definition.
- Reiteration of the idea of access and programmatic changes.
- Dr. Baquet referenced her article pertaining to defining a model for disparities research and suggested that calculations for reductions in mortality use rates for whites as the comparative figure for all races; this assumes the rates for whites are the best they could be and will never get better.
- Discussion of a disparity as a deviation from normal and suggestion that if a disparity exists, we should want to know why.
- Suggestion to add differences in access and availability to the working definition.
- Questions regarding what disparities exist in Maryland and the need to incorporate data into the disparity chapter.
- Discussion regarding the military population in Maryland and how rates of cancer are tracked in this population.
- Suggestion of a possible recommendation to be included in the chapter regarding data collection for minorities and sub-populations. Related discussion of cancer rates in Asians and the use of rates for Asians as the standard for comparison.
- Discussion and listing of contributing factors to disparities, including access, geography, type of treatment, insurance status, and socioeconomic status.
- Decision to have the group complete an assignment outside of the meeting: staff will send out the NCI definition and begin a list of categories of disparity; committee members will revise the definition as they wish and re-submit to staff along with additional items for the list of categories.
- The committee requested a summary of available sources of data, such as the cancer registry, and that staff send articles electronically where possible.
- Staff will coordinate next meeting dates, possibly September 24 and October 8.

- The next meeting will be used to: finalize the definition and categories of disparity, review available data and possibly have guest speaker Dr. Horon, review literature (Dr. Baquet will complete a brief lit review and committee members are asked to bring relevant articles), and discuss the presentation for the Consensus Conference.
- Suggestion to also have staff collect ideas for overarching principles and statements regarding the ideal situation in Maryland with reference to disparities.
- Suggestion to examine brochures and other literature produced by the health department and other agencies. Communication is a key issue. Also, involve the Department of Human Resources in our planning efforts.
- Discussion regarding racial classification and inclusion of other minorities besides African-Americans. Suggestion to add the Federal Racial Classification (OMB Directive 15) to the committee materials binder.